

11/15/01  
JC951 U.S. PTO

12-05-01

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Please type a plus sign (+) inside this box ☐

PTO/SB/05 (11-00)  
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 678-674(P9693)  
First Inventor Seung-Tack HYON  
Title EMOTICON INPUT METHOD FOR...  
Express Mail Label No. EL918810175US

JC580 U.S. PTO  
10/002919

11/15/01

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 15]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 5]
5. ☒ Oath or Declaration [Total Pages 2]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
  - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☒ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: checks \$758.00 and \$40.00

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label ☐ Correspondence address below  
(Insert Customer No. or Attach bar code label here)

Name Paul J. Farrell, Esq.  
DILWORTH & BARRESE, LLP  
Address 333 Earle Ovington Blvd.  
City Uniondale State New York Zip Code 11553  
Country U.S.A Telephone (516) 228-8484 Fax (516) 228-8516

Name (Print/Type) Paul J. Farrell Registration No. (Attorney/Agent) 33,494  
Signature [Signature] Date 11/15/01

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EL918810175US addressed to: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

Dated: November 15, 2001

[Signature]  
Barbara Evers

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**FEE TRANSMITTAL  
for FY 2002**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$ ) 798.00**Complete if Known**

Application Number	
Filing Date	Herewith
First Named Inventor	Seung-Taek HYON
Examiner Name	
Group Art Unit	
Attorney Docket No.	678-674(P9693)

**METHOD OF PAYMENT (check one)**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	04-1121
Deposit Account Name	DILWORTH & BARRESE, LLP

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 740	201 370	Utility filing fee	\$740.00
106 330	206 165	Design filing fee	
107 510	207 255	Plant filing fee	
108 740	208 370	Reissue filing fee	
114 160	214 80	Provisional filing fee	

**SUBTOTAL (1)** (\$ ) 740.00**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
21	-20** = 1	\$18	\$18
3	-3** = 0	\$84	\$0
Multiple Dependent		\$280	\$0

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 84	202 42	Independent claims in excess of 3
104 280	204 140	Multiple dependent claim, if not paid
109 84	209 42	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

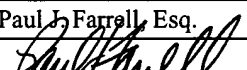
**SUBTOTAL (2)** (\$ ) 18.00**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for <i>ex parte</i> reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 400	216 200	Extension for reply within second month	
117 920	217 460	Extension for reply within third month	
118 1,440	218 720	Extension for reply within fourth month	
128 1,960	228 980	Extension for reply within fifth month	
119 320	219 160	Notice of Appeal	
120 320	220 160	Filing a brief in support of an appeal	
121 280	221 140	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,280	241 640	Petition to revive - unintentional	
142 1,280	242 640	Utility issue fee (or reissue)	
143 460	243 230	Design issue fee	
144 620	244 310	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Processing fee under 37 CFR 1.17(q)	
126 180	126 180	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	\$40
146 740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 740	249 370	For each additional invention to be examined (37 CFR § 1.129(b))	
179 740	279 370	Request for Continued Examination (RCE)	
169 900	169 900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid

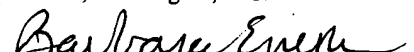
**SUBTOTAL (3)** (\$ ) 40.00**SUBMITTED BY**

Name (Print/Type)	Paul J. Farrell, Esq.	Registration No. (Attorney/Agent)	33,494	Telephone	(516) 228-8484
Signature		Date	11/15/01		

**Complete (if applicable)****CERTIFICATION UNDER 37 C.F.R. § 1.10**

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EL918810175US addressed to: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

Dated: November 15, 2001

  
 Barbara Evers

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Assistant Commissioner  
for Patents  
Washington, D.C. 20231

**UTILITY APPLICATION DATA SHEET UNDER 37 C.F.R. §1.76**

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Seung-Taek HYON

For: **EMOTICON INPUT METHOD FOR MOBILE TERMINAL**

Enclosed are:

- [X] 10 page(s) of specification  
[X] 1 page(s) of Abstract  
[X] 4 page(s) of claims  
[X] 5 sheets of drawings [x] formal [ ] informal  
[X] 2 page(s) of Declaration and Power of Attorney

ASSIGNEE NAME: **SAMSUNG ELECTRONICS CO., LTD.**

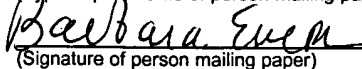
ASSIGNEE RESIDENCE: **KYUNGKI-DO, KOREA**

**CERTIFICATION UNDER 37 C.F.R. § 1.10**

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date November 15, 2001 in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EL918810175US addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.

Barbara Evers

(Type or print name of person mailing paper)



(Signature of person mailing paper)

- ☐ This application claims the benefit under 35 U.S.C. §119(e) of U.S. Provisional Application(s) No(s):

APPLICATION NO(S):

FILING DATE

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_

- ☒ Certified copy of applications

Country

Appln. No.

Filed

Korean

77441/2000

16 December 2000

from which priority under Title 35 United States Code, § 119 is claimed

☒ is enclosed.

☐ will follow.

**CALCULATION OF UTILITY APPLICATION FEE**

For	Number Filed	Number Extra	Rate	Basic Fee \$740.00
TOTAL CLAIMS	21	1	x 18 =	\$18.00
INDEPENDENT CLAIMS	3	0	x 84 =	\$0.00
<input checked="" type="checkbox"/> Multiple Dep. Claim			280	\$0.00
			<b>TOTAL \$758.00</b>	

- ☐ Verified Statement of "Small Entity" Status Under 37 C.F.R. § 1.27. Reduced fees under 37 C.F.R. § 1.9(f) (50% of total) paid herewith \$.

\*Includes all independent and single dependent claims and all claims referred to in multiple claims. See 37 C.F.R. § 1.75(c).

[X] The amount of \$40.00 for recording the attached Assignment is enclosed as a separate check.


[X] Check in the amount of \$758.00 to cover the [ ] recording, [X] filing fee(s) are attached.

[ ] Charge fee to Deposit Account No. 04-1121. Order No. \_\_\_\_\_  
TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

[X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and 1.17, at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 04-1121. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 04-1121 therefor. **TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.**

Respectfully submitted,

Date: November 15, 2001

  
\_\_\_\_\_  
Paul J. Farrell  
Reg. No. 33,494

**DILWORTH & BARRESE, LLP**  
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